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Assumed Names



LIMITED LIABILITY COMPANY DETAILS

Searched for: EXCEL RESEARCH GROUP, L.L.C.

ID Num: B23293

Name:EXCEL RESEARCH GROUP, L.L.C.

Type: Domestic Limited Liability Company
Resident Agent: NORMAN MILLER

Registered Office Address: 1117 SOUTH UNIVERSITY ANN ARBOR MI 48104

Mailing/Office Address:

Formation/Qualification Date:8-27-1998

Jurisdiction of Origin:MICHIGAN

Managed by: Members

Status: ACTIVE Date: Present

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LIMITED LIABILITY COMPANY DETAILS

All Names:

Id Num

Creation Date:

Renewal Date

Expiration Date

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7-17-2007

12-31-2012

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CORPORATE ENTITY DOCUMENTS

EXCEL RESEARCH GROUP, L.L.C.

6	CERTIFICATE OF RESTORATION (DOMESTIC)	Number of Pages 6	Filing Date 7/17/2007
	2002 ANNUAL STATEMENT	. 2	7/17/2007
	2005 ANNUAL STATEMENT	2	7/17/2007
6	CERTIFICATE OF ASSUMED NAME	2	7/17/2007
	2007 ANNUAL STATEMENT	2	7/17/2007
	2006 ANNUAL STATEMENT	2	7/17/2007
	2004 ANNUAL STATEMENT	. 1	5/21/2004
	2003 ANNUAL STATEMENT	1	11/4/2003
	1999 ANNUAL STATEMENT	1	5/16/2003
	2000 ANNUAL STATEMENT	1	5/16/2003

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Michigan Department of Labor & Economic Growth

Filing Endorsement

This is to Certify that the CERTIFICATE OF RESTORATION (DOMESTIC)
for

EXCEL RESEARCH GROUP, L.L.C.

ID NUMBER: B23293

received by facsimile transmission on July 17, 2007 is hereby endorsed Filed on July 17, 2007 by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 17TH day of July, 2007.

, Director

Bureau of Commercial Services

07/17/2007 10:24 FAX 313 393 7579

BODMAN LLP

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07/16/2007 15:00

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DATE RECEIVED	UPOR BUREAU USE ON	(r) _
	This document is effective on the date filed, unless a subsequent effective date within 90 days after receive date is stated in the document.	d
HANE Carrie W. Leahy		
ADDRESS 201 Division Str	eet, Suite 400	
Ann Arbor	etate ar code Michigan, 48104	EFFECTIVE DATE
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CERTIFICATE OF RESTORATION OF GOOD STANDING

For use by Domestic Limited Liability Companies ' (Please read information and instructions on the last page)

1,		name of the limited liability company is cel Research Group, L.L.C.					
2.	The	eldentification number assigned by the E	lureau is: .	B23293			-
3.		riplete this item only if the name in Item Anicles of Organization are hereby ame		r use.			
	_						•
4.	a.	The name of the resident agent is:	Norman Miller				
	ħ,	The address of the registered office is:					,
	11	17 South University	Ann Arbor	, Mich	·lanaa '	48104	
	c ,	greet Address The mailing address of the registered of	ico fice if different than 41		nguti	(SIP Code)	
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5.		limited liability company states that the all of the years for which statements wen			its and a	applicable fees	
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Michigan Department of Labor & Economic Growth

Filing Endorsement

This is to Certify that the CERTIFICATE OF ASSUMED NAME for EXCEL RESEARCH GROUP, L.L.C.

ID NUMBER: B23293

to transact business under the assumed name of EXCEL TEXT PREPARATION, COURSEPACKS, & COPIES

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Expiration Date: December 31, 2012



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, Director

Bureau of Commercial Services

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SCS/CD-541 (Rev. 12/03) MICHG	AN DEPARTMENT OF LABOR & ECONO	MIC GROV	VTH .]
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^{Name} Susan M. Ko	rnfield, Esq.			
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Ann Arbor, MI 4			EXPIRATION DATE: DECEMBER 31,	
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For use	CERTIFICATE OF A by Corporations, Limited Partner (Please read information and i	ships ä	nd Limited Liability	Companies
(nonprofit corporation	orovisions of Act 284, Public Acts of 1972 s), Act 213, Public Acts of 1982 (limited p. cration, limited partnership, or limited liabil	artnerships	s), or Act 23, Public Acts	of 1993 (limited liability
	corporation, limited partnership, or limited ch Group, L.L.C.	liability co	mpany is:	
2. The identification	number assigned by the Bureau is:		B23293	
3. The assumed nam	e under which business is to be transacted	is:	. ,	
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4. This document is i	nereby signed as required by the Act.			
COMPLE	ETE ITEM 5 ON LAST PAGE IF THIS NA	ME IS AS	SUMED BY MORE THA	N ONE ENTITY.
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•	Susan M. Komfield, Attorney	1_0		
	(Type or Print Name)		(Type or Print Title of Capacity)	

(Limited Partnerships Only - Indicate Name of General Panner IF the General Panner is a cosporation or other entity)

Case 2:07-cv-12731-AC-VMM

Document 10-2

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BEST PART (1986) MICHIGAN DEFARTMENT OF LABOR & ECONOMIC GROWTH LIMITED LIABILITY COMPANY ANNUAL STATEMENT

2007

nde Lebinali, 10' xr				
B23293	Limited Liabilly Company Name EXCEL RESEARCH GROUP, L.L.C.			
1. Resident agent name and n	naling address of the registered office	If different than t		जुलाई कांद्र तिश्वप्रश
Norman Milli 1117 South Ui				•
ANN ARBOR MI	49104		<i>.</i>	
	•	•		
2. The endress of the register 1117 SOUTH LINI ANN ARECIT MI	VERSITY	If different than in from box, street, easy, state		
3. Signature of au	horized member, manager or agent.	Title	Date	Phone (Optional)
Non	> mle	PRESIDENT	7/16/01	

Filing Fee: \$25.00

Arekial Statement Due February 15, 2007.

Annual Statement Must Be Signed

Domestic: Signature of a manager if management is vested in managers, by at least 1 member if management remains in the members or by an authorized agent of the domestic limited liability company.

Foreign: Signature of a person with authority to do so under the laws of the foreign limited liability company's jurisdiction of organization.

Make your check or money order payable to the State of Michigan.

Return to: Department of Labor & Economic Growth Bureau of Commercial Services Corporation Division P.O. Box 30768 Laneing Mi 48909

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BOX 2000 (1990) MICHIGAN DEPARTMENT OF LABOR & ECONÔMIC GROWTH LIMITED LIABILITY COMPANY ANNUAL STATEMENT

2006

bie February 16, 2008 Beddienlien Number B23293	Excel Research Group, L.L.C.			
1. Resident a pent mane and mail	ng endinesa of the registered office	If different than 1, actors of registered will		agent and maling
Norman Miller 1117 South Univ Ann Areor Mi 44	ERSITY			
2 The address of the registered office 1117 South University Ann Areor MI 48102		If different than a trumber, street, city, clair		
3. Signature of author	orized member, manager or agent.	Tile	Dalo	Phone (Optional)
Mrs. \	mile	RN6810A	7/16/07	

Filing Fee: \$25.00

Arrest Statement the February 15, 2008.

Annual Statement Must Be Signed

Domestic: Signature of a manager if management is vested in managers, by at least 1 member if management remains in the members or by an authorized agent of the comestic limited liability company.

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ECONOMIC GROWTH MICHIGAN DEPARTMENT OF LABOR & ECONOMIC GROWTH LIMITED LIABILITY COMPANY ANNUAL STATEMENT

2005

Due February 16, Zout				
Meniliteation Number B23293	Limited Liability Company Name Excel Research Group, L.L.C.	•		
1. Resident agent name and mai	ing address of the registered office	If different than		
norman miller				
1117 South Unit Ann Areor Mi			•	
2. The address of the registery office 1117 SOUTH UNIVERSITY ANN ARBOR MI 48104		If different than frumber, street, city, str		
3. Signature of auth	orized member, manager or agen	it. Tibe	Date	Phone (Optional)
Man	\ m.d.	MERIOG-	7/10/	17

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· BCSCD-UND 114000 MICHIGAN DEFARTMENT OF LABOR & ECONOMIC GROWTH
LIMITED LIABILITY COMPANY ANNUAL STATEMENT

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2002

Bue February 15, 2002				
Identification Number	Umited Liability Company Name	•		
B23293	excel research group, l.l.c.			
1. Resident agent name and mali	ng address of the registered office	lf different than 1, बर्वनंबद्ध बार्ब्यक्षरूच जी		क्ष्म् आर्थ सार्व्यात्र
NORMAN MILLER	•			
1117 South Univ	ERSITY	•		
ANN AREOR MI 48	M04			
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s. Signature of autho	rized member, manager or agent.	THE	Data	Phone (Optional)
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